2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Jan 16, 2007 08:00 AN Secretary of State

ANNUAL REPORT				Jan 10, 200 / 08:00		
1. Entity Nam	MENT # P010000427 signs, INC.	83				Secretary of Sta
	e of Business OLE GARDENS CIR. I GARDENS, FL 33418	Mailing Address 6064 SEMINOLE GARDENS CIR PALM BEACH GARDENS, FL 3:				
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DO NOT WRITE IN THIS SPA			_	01052007	No Chg-P	CR2E034 (11/05)
			CE	4. FEI Numb 65-112	-	Applied For Not Applicable
					of Status Desired	\$8.75 Additional Fee Required
	6. Name and Address of Current Re	gistered Agent		L		2 2 2 2
SILVA, JULIANNE 6064 SEMINOLE GARDENS CIR. PALM BEACH GARDENS, FL 33418					NOT W THIS SP	
	named entity submits this statement for the ions of registered agent.	e purpose of changing its register	ed office or registe	ed agent, or bo	th, in the State of Flo	rida. I am famíliar with, ând accept
SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE Registered Age.				i when reinstating)		DATE
FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00 9. Election Campaign Final Trust Fund Contribution.				.00 May Be led to Fees		
10.	OFFICERS AND DI	RECTORS	-	•		endir di kanana di 1861. Tanàna
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SILVA, JULIANNE 6064 SEMINOLE GARDENS CIR. PALM BEACH GARDENS, FL 334*	8			linnnn	10C0C07E
THE NAME STREET ADDRESS GITY-ST-ZIP					~01/ĬĔ ŹŎ Ŧ	0586275 '-80047-003 150.00
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<u> </u>		DO	NOT W	'RITE
THE			1		THIS SE	

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 507, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

STREET ADDRESS
CATY-SI-ZIP
TITLE
NAME
STREET ADDRESS
CATY-SI-ZIP
TITLE
NAME
STREET ADDRESS
CATY-SI-ZIP
CATY-SI-ZIP
CATY-SI-ZIP
CATY-SI-ZIP
CATY-SI-ZIP

LATER AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1.11.07 561.494.287